

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

ADDRESS (number and street)

115 Apollo Dr.

☐Check if different  
than previously  
reported. (ACC)

Cape Carteret

NC

28584

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00250589

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☒July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

04

01

2006

through

06

30

2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Steve Malay

Signature of Treasurer

Electronically Filed by Steve Malay

Date

07

11

2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only							
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**FEC FORM 3X**  
(Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	4	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2006</span>		7314.07
(b) Cash on Hand at Beginning of Reporting Period .....	7695.07	
(c) Total Receipts (from Line 19) .....	8183.50	8564.50
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	15878.57	15878.57
7. Total Disbursements (from Line 31) .....	3363.97	3363.97
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	12514.60	12514.60
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

Report Covering the Period:

From:

M M  
0 4D D  
0 1Y Y Y Y  
2 0 0 6

To:

M M  
0 6D D  
3 0Y Y Y Y  
2 0 0 6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	366.00	366.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	7333.50	7651.50
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➡	7699.50	8017.50
(b) Political Party Committees .....	484.00	547.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➡	8183.50	8564.50
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	8183.50	8564.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	8183.50	8564.50

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>		<b>COLUMN A</b> Total This Period	<b>COLUMN B</b> Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		0.00	0.00
(i) Federal Share.....			
(ii) Non-Federal Share.....		0.00	0.00
(b) Other Federal Operating Expenditures.....		3363.97	3363.97
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡		3363.97	3363.97
22. Transfers to Affiliated/Other Party Committees.....		0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		0.00	0.00
24. Independent Expenditure (use Schedule E) .....		0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....		0.00	0.00
26. Loan Repayments Made.....		0.00	0.00
27. Loans Made.....		0.00	0.00
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....		0.00	0.00
(b) Political Party Committees		0.00	0.00
(c) Other Political Committees (such as PACs) .....		0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....		0.00	0.00
29. Other Disbursements.....		0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....		0.00	0.00
(ii) "Levin" Share .....		0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....		0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....		0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..		3363.97	3363.97
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....		3363.97	3363.97

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	8183.50	8564.50
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	8183.50	8564.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	3363.97	3363.97
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3363.97	3363.97

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 / 14

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Dan Beall Mailing Address 109 Quork Ct. City State Zip Code Kill Devil Hills NC 27948 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation retired retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 205.00		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.4973 Amount of Each Receipt this Period 10.00 raffle ticket purchase
<b>B.</b> Full Name (Last, First, Middle Initial) George Cleveland Mailing Address 224 Campbell Place City State Zip Code Jacksonville NC 28546 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation State of NC Rep. in NC House Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 230.00		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.4655 Amount of Each Receipt this Period 70.00 Pass the hat
<b>C.</b> Full Name (Last, First, Middle Initial) George Cleveland Mailing Address 224 Campbell Place City State Zip Code Jacksonville NC 28546 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation State of NC Rep. in NC House Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 285.00		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.4984 Amount of Each Receipt this Period 55.00 raffle ticket purchase
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		135.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 14

(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

**A.**

Full Name (Last, First, Middle Initial)

Sheri Elks

Mailing Address 122 Bowspirit Pl.

City State Zip Code  
 Bath NC 27808

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ret'd

Occupation  
ret'd

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 4 / 2 9 / 2 0 0 6

Transaction ID: SA11A1.4912

Amount of Each Receipt this Period

191.00

silent auction purchase

**B.**

Full Name (Last, First, Middle Initial)

Ron Toppin

Mailing Address 328 Wedgewood Dr.

City State Zip Code  
 Washington NC 27889

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Trucking co.

Occupation  
operator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 0 4 / 2 0 0 6

Transaction ID: SA11A1.5036

Amount of Each Receipt this Period

40.00

raffle ticket purchase

**SUBTOTAL** of Receipts This Page (optional) .....

231.00

**TOTAL** This Period (last page this line number only) .....

366.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
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PAGE 8 / 14

☐ 11a ☒ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Beaufort County GOP Mailing Address 104 Holly Circle City State Zip Code Washington NC 27889 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 53.00		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 9 / 2 0 0 6 <b>Transaction ID:</b> SA11B.4948 Amount of Each Receipt this Period 53.00 County conv. delegate fee
<b>B.</b> Full Name (Last, First, Middle Initial) Camden County GOP Mailing Address 102 Smith Dr. City State Zip Code Camden NC 27921 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 7.00		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 9 / 2 0 0 6 <b>Transaction ID:</b> SA11B.4949 Amount of Each Receipt this Period 7.00 County conv. delegate fee
<b>C.</b> Full Name (Last, First, Middle Initial) Carteret County GOP Mailing Address PO Box 1775 City State Zip Code Newport NC 28570 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 50.00		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 7 / 2 0 0 6 <b>Transaction ID:</b> SA11B.4959 Amount of Each Receipt this Period 50.00 conv. program ad purchase
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		110.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 / 14

☐ 11a ☒ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

**A.** Full Name (Last, First, Middle Initial)

Carteret County GOP

Mailing Address PO Box 1775

City State Zip Code  
 Newport NC 28570

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

122.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 4 / 2 9 / 2 0 0 6

Transaction ID: SA11B.4950

Amount of Each Receipt this Period

72.00

County conv. delegate fee

**B.** Full Name (Last, First, Middle Initial)

Craven County GOP

Mailing Address PO Box 13466

City State Zip Code  
 New Bern NC 28561

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 4 / 2 7 / 2 0 0 6

Transaction ID: SA11B.4961

Amount of Each Receipt this Period

50.00

conv. program ad purchase

**C.** Full Name (Last, First, Middle Initial)

Craven County GOP

Mailing Address PO Box 13466

City State Zip Code  
 New Bern NC 28561

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 4 / 2 9 / 2 0 0 6

Transaction ID: SA11B.4951

Amount of Each Receipt this Period

100.00

County conv. delegate fee

**SUBTOTAL** of Receipts This Page (optional) .....

222.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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PAGE 10 / 14

☐ 11a ☒ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Craven County GOP Women's Club Mailing Address 452 Neuchatel Rd. City State Zip Code New Bern NC 28562 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 50.00			Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 7 / 2 0 0 6 <b>Transaction ID:</b> SA11B.4960 Amount of Each Receipt this Period 50.00 conv. program ad purchase
<b>B.</b> Full Name (Last, First, Middle Initial) Currituck County Republican Party Mailing Address 1097 Waterlily Rd. City State Zip Code Coinjock NC 27923 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 18.00			Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 9 / 2 0 0 6 <b>Transaction ID:</b> SA11B.4952 Amount of Each Receipt this Period 18.00 County conv. delegate fee
<b>C.</b> Full Name (Last, First, Middle Initial) Hyde County GOP Mailing Address 646 West Waterway Dr. City State Zip Code Belhaven NC 27810 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3.00			Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 9 / 2 0 0 6 <b>Transaction ID:</b> SA11B.4953 Amount of Each Receipt this Period 3.00 County conv. delegate fee

**SUBTOTAL** of Receipts This Page (optional) .....

71.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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PAGE 11 / 14

☐ 11a ☒ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Nash County GOP Mailing Address PO Box 8122 City Rocky Mount State NC Zip Code 27804 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 12.00		Date of Receipt MM / DD / YYYY 04 / 29 / 2006 <b>Transaction ID:</b> SA11B.4954 Amount of Each Receipt this Period 12.00 County conv. delegate fee
<b>B.</b> Full Name (Last, First, Middle Initial) Pamlico County GOP Mailing Address PO Box 122 City Merritt State NC Zip Code 28556 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 12.00		Date of Receipt MM / DD / YYYY 04 / 29 / 2006 <b>Transaction ID:</b> SA11B.4955 Amount of Each Receipt this Period 12.00 County conv. delegate fee
<b>C.</b> Full Name (Last, First, Middle Initial) Pitt County GOP Mailing Address PO Box 8498 City Greenville State NC Zip Code 27835 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 25.00		Date of Receipt MM / DD / YYYY 04 / 29 / 2006 <b>Transaction ID:</b> SA11B.4956 Amount of Each Receipt this Period 25.00 County conv. delegate fee

**SUBTOTAL** of Receipts This Page (optional) .....

49.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 14

(check only one)

☐ 11a ☒ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

**A.** Full Name (Last, First, Middle Initial)

Wayne County GOP

Mailing Address PO Box 10821

City State Zip Code  
 Goldsboro NC 27532

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 4 / 2 9 / 2 0 0 6

Transaction ID: SA11B.4957

Amount of Each Receipt this Period

30.00

County conv. delegate fee

**B.** Full Name (Last, First, Middle Initial)

Wilson County GOP

Mailing Address 313 Ward Blvd. NW

City State Zip Code  
 Wilson NC 27896

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 4 / 2 9 / 2 0 0 6

Transaction ID: SA11B.4958

Amount of Each Receipt this Period

2.00

County conv. delegate fee

**SUBTOTAL** of Receipts This Page (optional) .....

32.00

**TOTAL** This Period (last page this line number only) .....

484.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 14

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

**A.** Beaufort County Community College

Mailing Address PO Box 1069

City  
Washington

State  
NC

Zip Code  
27889

Purpose of Disbursement  
Conv. venue rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.5067

Date of Disbursement

/   /

Amount of Each Disbursement this Period

240.00

Full Name (Last, First, Middle Initial)

**B.** Carnival Cruise Lines

Mailing Address PO Box 526170

City  
Miami

State  
FL

Zip Code  
33152

Purpose of Disbursement  
raffle award payment

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.5069

Date of Disbursement

/   /

Amount of Each Disbursement this Period

244.12

Full Name (Last, First, Middle Initial)

**C.** Occasions by George Catering

Mailing Address 906 Isabella Ave.

City  
Washington

State  
NC

Zip Code  
27889

Purpose of Disbursement  
Catering for Dist. convention

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.5064

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2270.86

**SUBTOTAL** of Disbursements This Page (optional) .....

2754.98

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 14 / 14

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

**A.** Full Name (Last, First, Middle Initial)  
Judith Wilgus

Mailing Address 117 Heverly Dr.

City State Zip Code  
Emerald Isle NC 28594

Purpose of Disbursement  
raffle award

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.5056

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	0	6

Amount of Each Disbursement this Period

235.00

**SUBTOTAL** of Disbursements This Page (optional) .....

235.00

**TOTAL** This Period (last page this line number only) .....

2989.98